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FAX COVER SHEET

Date: January 26, 2005	Phone Number	Fax Number
To: USPTO, Examiner Kevin M. Bernatz		(703) 872-9306
From: Dominic M. Kotab		

Docket No.: HIT1P034/HSJ9 2003 0163US1

App. No: 10/631,997

Total Number of Pages Being Transmitted, Including Cover Sheet: 14

Message:

Please deliver to the Examiner Bernatz.

Thank you,

Dominic M. Kotab

☐ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

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January 26, 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Hardayal S. Gill

Application No.: 10/631,997

Filed: 07/30/2003

For: BALLISTIC GMR STRUCTURE USING
NANOCONSTRUCTION IN SELF PINNED
LAYERS

Attorney Docket No.:

HIT1P034/HSJ920030163US1

Examiner: BERNATZ, Kevin M.

Group Art Unit: 1773

Date: January 26, 2005

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CENTRAL FAX CENTER**JAN 26 2005**CERTIFICATE OF FACSIMILEI hereby certify that this correspondence is being
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Signed:

Nancy Rushton

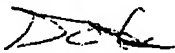
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	32	32	00	X25 = \$	OR	X50 = \$0
INDEP CLAIMS	04	03	01	X100 = \$	OR	X200 = \$200
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$180		\$360
TOTAL				\$		\$200

Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-2587.Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-2587 (Order No. HSJ9-2003-0163US1). A copy of this sheet is enclosed for billing purposes.Respectfully submitted,
Zilka-Kotab, PC
Dominic M. Kotab
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San Jose, CA 95172-1120
Telephone: (408) 971-2573

(Revised 1/96)